DEPARTMENT OF HEALTH SERVICES

744 P STREET BOX 942732 ACRAMENTO, CA 94234-7320 (916) 322-1584



Date Issued: April 18, 1995

CMSP Letter: 95-4

To: All CMSP Coun

All CMSP County Welfare Directors

Subject:

FORMATION OF CMSP FORMS REVISION WORKGROUP

The County Medical Services Program (CMSP) Governing Board's Eligibility Committee voted at its February meeting to establish a workgroup of interested persons to review and revise current CMSP forms. The workgroup, which will exist for four months, will meet periodically (most likely one time per month) in person at a location and time convenient to participating members. Members will also be asked to review, comment on, and revise forms and other written materials on a flow basis at other times in their home counties.

In order to successfully complete the necessary work in this short timeframe, we request that you send the name, mailing address, telephone number, and FAX number of a knowledgeable person from your county who will participate in this effort no later than May 1, 1995. The information should be sent to Mr. Albert Cooper of my staff at (916) 322-1615 or via FAX to (916) 322-1533.

If you have any questions about the workgroup, please contact Mr. Cooper directly as soon as possible. Should staffing constraints prevent you from designating a participant, we request that you forward in writing any suggested and/or necessary revisions to CMSP forms currently in use so that your input will be available to the workgroup.

Sincerely,

Jim Martinez, Chief

County Medical Services Program